



Adult Social Care Select Committee
17 January 2012

Update on Personalisation: Self Directed Support, the Resource Allocation System and the Reablement Service

Purpose of the report: Policy Development and Review

This paper provides an update on the rollout of Self Directed Support (SDS), the Resource Allocation System (RAS) and the launch of the Reablement Service across Surrey. The paper will be supported by a more detailed presentation on the Resource Allocation System (RAS).

Introduction:

- 1 In the traditional system of social care, professionals made decisions on what support people could have and on who would provide it. This was frustrating for disabled people and limited their freedom. To reform this system and make it more empowering, the independent charity 'In Control' developed a new system called Self Directed Support in 2003, in collaboration with disabled people, families, carers and social care practitioners.
- 2 Since 2003, the government and the other major political parties have embraced Self Directed Support as a central pillar of the personalisation of adult social care services. The cross-party policy Putting People First¹ required Self Directed Support to become mainstream, together with the development of more preventative and universal services and the embracing of social capital, helping people to help themselves and each other. The current vision for adult social care² builds on this, reaffirming the core principles of Self Directed Support: "With choice and control, people's dignity and freedom is protected and their quality of life is enhanced. Our vision is to make sure everyone can get the personalised support they deserve."

¹ Putting People First – a shared vision and commitment to the transformation of adult social care (Dec 2007)

² Department of Health 'A Vision for Adult Social Care: Capable communities and Active Citizens' (Nov 2010)

Self Directed Support

What is Self Directed Support?

- 3 Under Self Directed Support, local authorities retain the same statutory duties and charging policies. However, there are changes in the way people are assessed for services and support and in the way decisions are made on the services and support they receive. Surrey has signed up to the seven principles of personalisation, which are:
- a) Right to Independent Living,
 - b) Right to Self Determination,
 - c) Right to a Personal Budget,
 - d) Right to Flexible Funding,
 - e) Right to Accessibility,
 - f) Right to Accountability, and
 - g) The Capacity Principles
- 4 Surrey embraces these principles in the way we support people through the Self Directed Support journey:
- a) **Eligibility** – Proportionate assessments are carried out to respond appropriately to individual situations
 - b) **Supported Self Assessment** – This is an assessment which asks people and their carers to give their views on their situation and the level of support they feel they need. This is a more person-centred approach, in which people and their carers are encouraged to exercise increased choice, control and responsibility by completing as much of the assessment as they can themselves. Staff act as enablers as far as possible, and will take the lead in making sure everything is correctly understood and completed as appropriate to the individual and their support network.
 - c) **Indicative Personal Budget** – Once the assessment has been agreed, a sum of money (an indicative personal budget) is calculated from the responses through a Resource Allocation System (RAS). This is fundamental to Self Directed Support: in order for people to be able to make choices and take control of the solutions they choose, to meet their eligible social care needs, a transparent, equitable sum of money needs to be generated. Surrey has developed its own version of this Resource Allocation System.
 - d) **Support Planning** – People and their carers then decide how they would use the identified sum of money to meet their individual outcomes³, with as much or as little assistance as they like. People can be as creative as they like in working out solutions to their

³ What a person would be able to do, change or achieve with any support he or she receives

current situations, and may choose support in the public, private, voluntary and charitable sectors, as well as recruit the assistance of friends and family. The funding for the support can also be managed in a variety of ways, and in different combinations, to suit each individual: while some may still prefer to receive services directly from Surrey County Council, others may wish to purchase some or all of their support through direct payments managed by themselves or people they trust.

- e) **Personal Budget Agreement** – When a completed Support Plan meets both the individual outcomes and the assessed needs of a person (and their carer), it is agreed. The total cost of support in the Support Plan then becomes the Agreed Personal Budget
- f) **Organise Support** – Support is put into effect, as outlined in the completed Support Plan. The monitoring and review process depends on the risks associated with the Plan. If it appears that the Plan may be challenging to manage, either because of the complexity or individual circumstances, reviews can be scheduled on a more frequent basis.

David is 65 and lives at home with his partner who is his main carer. David is a mechanical engineer – a profession he had to leave following the progression of his Multiple Sclerosis condition. He was actively involved in the church, an ardent Arsenal supporter and enjoyed trips to the theatre and cinema. In the last six months David has experienced depression and anxiety as a direct result of the many losses in his life. This placed increased pressure on his partner, who gave up full time paid work to care for David. They described their situation as “feeling hopeless.”

David and his partner completed a Supported Self Assessment in which they described the impact his condition was having on their lives. With the support of occupational therapy, physiotherapy and social work, they were able to develop a plan that met their needs, utilising a Personal Budget. David’s partner has returned to work part time. David has employed a personal assistant to support him in tasks at home and accessing the community. The installation of telecare has reduced anxiety for both David and his partner in the knowledge he can access help if required at any time. David is looking at volunteering at the arts centre and his church is supporting him in this. The support they now have in place has improved their worlds. “We feel there are things to look forward to. We are part of our community again and have purpose and meaning to our days, thanks to the choices we have been able to make, as a result of the flexibility the SDS Personal Budget has allowed.”

Rollout

- 5 Self Directed Support has been rolled out across Surrey, with the final team in Personal Care and Support going live in May 2011. A robust programme of support for teams, including ‘bite-size’ training sessions, has been delivered by the Transformation Team through to December 2011 to embed personalisation. The Staff Practice Guide was published in the autumn of 2011.
- 6 Transformation have been working closely with Surrey and Borders Partnership (SABP) over the last few months to develop an integrated

approach to delivering Personalisation and Self Directed Support for people with significant Mental Health needs and their carers. The 48 Integrated Mental Health Team Managers and Seniors received training during December 2011 on eligibility, personalisation and Self Directed Support; and training for front line staff begins in Epsom Community Mental Health Recovery Service (CMHRS) in January 2012. Teams will have a week of support from Transformation staff and senior clinicians already trained. This will then enable them to provide Self Directed Support to any individual or carer referred to the integrated teams who is eligible for services.

- 7 The rollout of Self Directed Support was underpinned by significant system and organisational changes. This is part of Adult Social Care's strategic shift to 'redesign systems, processes and structures for a Directorate that is fit for purpose'. In terms of systems, Swift has been updated to V25, and the Adults Integrated System (AIS) and Electronic Social Care Record (ESCR) have gone live and have been rolled-out to teams alongside Self Directed Support. Personal Care and Support has also re-organised into local and generic teams, co-located with Districts and Boroughs.

Training

- 8 A comprehensive training programme for Personalisation and Self Directed Support was co-designed and co-delivered by Surrey Independent Living Council, Advocacy Partners and the Transformation Team in Adult Social Care. From August 2010, Learning and Development trainers also co-delivered the training. Training was customised for different staff groups and designed to cover the cultural change associated with personalisation, as well as the process changes. Once teams had undertaken their Self Directed Support and Adults Integrated Systems (AIS) training, they went live. A team of expert practitioners from the Transformation Team were on-site with each team for a number of weeks to guide the 'operationalising' of Self Directed Support and the Adults Integrated Systems, provide practical support, guidance and encouragement during their go-live period.
- 9 To supplement this training two new key practice skills courses, on Assessment and on Support Planning, have also been developed and are being delivered. This successful rollout process is being replicated from January to April 2012 for Reablement teams and Mental Health practitioners. Work is ongoing to redesign and adapt Self Directed Support and Adults Integrated System training to reflect the ongoing needs of new and existing untrained staff.
- 10 All Personal Care and Support practitioner staff have undertaken Self Directed Support training.

Brokerage

- 11 Brokers can help people with their support planning and thinking about different solutions, negotiating services and costs, purchasing and

organising the chosen support, sorting out the easiest way to pay for services and support and putting together and/or arranging a support plan. In Surrey there are external brokers based with DeafPlus, Just Advocacy, Oakleaf Enterprise, SAVI, Surrey Disabled People's Partnership, and VoiceAbility; as well as internal brokers within each of the Locality Teams and the Transition Team.

Marketplace

- 12 The flexibility of direct payments as part of Self Directed Support is likely to result in a lower demand for services directly commissioned by Surrey County Council and a rise in the demand for new more flexible solutions. As a result, while some costs may be saved over the long term, this overall shift in funding control to direct payment recipients presents new challenges for commissioning and procurement in terms of:
- a) Uncertainty in projecting future requirements for current, directly commissioned services as a basis for contracts.
 - b) Developing unit costs for Council-provided services, so there is a meaningful way for people to compare the cost of these services to what could be bought with direct payments.
 - c) Identifying and filling gaps in the marketplace.
 - d) Ensuring providers work towards a person-centred approach, and have the flexibility to meet the requirements of individuals' Support Plans.
 - e) Developing a knowledge base of potential services and support in Surrey. As people choose from a greater variety of services and support, they should receive very clear and useful information on what is available. This is to allow them to make "informed choices", and for us to manage risks where people choose to receive services from unknown/unregulated/unrated providers.
12. In anticipation of these challenges, a range of information and advice services, including the Surrey Information Point and Support with Confidence, have both been developed to help people to choose the right support to enable them to live independently. A programme of engagement with private and voluntary sector providers has also been undertaken. Work will commence in 2012 to develop a more diverse range of services in the Surrey market and to grow and access social capital within local communities.

Provision of Information and Advice

- 13 The provision of information and advice is an important part of Surrey's commitment to Self Directed Support and personalisation. Surrey has put in place a range of services to ensure residents are informed about where they can go to get the best information and advice about their care and support needs.

Support with Confidence

- 14 This is a new initiative between Adult Social Care, Trading Standards and Surrey Independent Living Council (SILC), which was launched in March 2011. It enables people to buy services from a range of providers who have passed checks and minimum requirements, for example enhanced CRBs and particular training. There are currently 28 providers registered with Support with Confidence. It is currently being promoted with stakeholders and we anticipate this figure will increase in the next quarter.
- 15 Support with Confidence includes providers of social care and support services that are currently unregulated by formal inspection regimes: e.g. Personal Assistants. As part of this, Surrey Independent Living Council provides four day training sessions to prospective Personal Assistants on both weekdays and weekends. Personal Assistants accredited through this scheme are those who have successfully completed the training, had their references followed up and undergone an enhanced Criminal Record Bureau check.

Surrey Information Point

- 16 This is a new online directory of information, services and activities to support adults in Surrey to live independently. It also provides a trusted information resource for health and social care professionals and community organisations to offer information and advice services. It was launched in February 2011 and was developed in partnership by Surrey County Council, Social Information on Disability (SID) and NHS Surrey, with input from a range of community and voluntary sector partners. The website brings together accurate and up to date information on community services, facilities and health conditions. People can search using keywords, locations or topics. It also includes personalised packages of information on topics, such as 'financial help for carers' and sections on health conditions, such as dementia.

Surrey Independent Living Council (SILC)

- 17 SILC provides a wide range of information and advice to support independent living, personalisation and direct payments. SILC has developed additional information and tools that are designed to help people plan and manage their own support, including guides to supported self-assessment, support planning and review; costing calculators, support planning and budget management tools; on-line monitoring and reconciliation guide and forms. It has also developed three additional web based services designed to make it easier for people to organise and manage the support they require are these are now fully operational.
- a) **Activity Finder** – Provides a central and accessible way for people to find out what activities are going on in Surrey and to let others know what they are doing, or are interested in doing. It provides an opportunity for people with shared interests to link up, share resources and information and to do activities together.

- b) **Care Finder** – Enables people to find which registered care providers are operating in their area. For providers it is a way to make people aware of their services including, capacity, charges, payment terms, quality ratings, etc. It gives a forum for people to record and share their experience of providers and improves competition between providers with a view to reducing costs and improving quality.
 - c) **PA Finder** – Links together people who are looking to employ personal assistants and people who want to work as a personal assistant. It provides information, guides and tools to help people as employers and is being developed to provide an element of PA accreditation, induction training and to enable training providers to make people aware of their services.
- 18 SILC is currently developing **Timebank** which will offer a quick and accessible way to link people with small amounts of time available, to those who need temporary, short term or small amounts of support. It will also enable providers to make people aware of any free capacity they have to offer.

Having a team of Personal Assistants (PAs) has enabled me to carry on with one of my favourite hobbies. Growing plants and tending my garden has always been a great joy and as it has been particularly colourful this year. One of my PAs encouraged me to enter a gardening competition organised by Mole Valley Housing Association. I received an invitation to attend a ceremony in Dorking where we were shown slides of all the entries. My prize was £25 in Gardening Vouchers and a certificate for Runner Up in the category – *Container Gardens MVHA in Bloom 2011*. It was such a thrill to receive an award and to be able to join other enthusiastic gardeners who had won prizes in the different garden categories from hanging baskets to vegetable gardens.

Engagement with Providers and Development the Market

- 19 A series of engagement events on personalisation and its implications were held with local private and voluntary sector providers during 2010/11. With the support of local Borough and District Council managers, Councils for Voluntary Service and the Surrey Care Association, these engagement events were targeted at Borough and District staff, voluntary sector providers, representative organisations giving support and guidance to people and their carers, and providers of care and other services in the private sector.
- 20 The events were designed to raise awareness of personalisation and to begin to discuss how, together, we can:
- a) Best develop the adult social care market so that we can ensure people can have genuine choice over their support, and do not experience barriers to achieving their individual outcomes
 - b) Celebrate and publicise the positive changes that some providers have already made in response to personalisation
 - c) Encourage others to embrace the personalisation agenda.

- 21 In 2012 Adult Social Care will start working to develop a more diverse range of services in the Surrey market, with more specialists and micro-providers, with which people can use their personal budgets to purchase care and support services. There will also be a focus upon developing and accessing social capital – helping people to help themselves and each other – within local communities.

Managing money

- 22 To offer personalised services, we need to make the deployment of resources as flexible as possible with the most amount of choice and control for individuals that need our support. Having a variety of managing money options that suit individuals with differing levels of capacity, increases the number of people that benefit from self directed support.
- 23 Work to develop a range of managing money options is being undertaken by the Transformation team. This work includes the setting up of an Individual Service Fund (ISF) pilot and a review of the costs and benefits of Supported Managed Accounts (SMAs). When the ISF pilot and SMA evaluation have been completed we would hope to have a range of ways people can manage an individual budget with clear eligibility criteria for each one.

Individual Service Funds

- 24 Surrey County Council plans to pilot these for six months in 2012, allow people to have some control and accountability over their personal budget without having to manage a direct payment. Key characteristics of Individual Service Funds include:
- a) Surrey County Council pays the money to the provider who manages it on the individual's behalf
 - b) The person decides how to spend the money to achieve the outcomes identified within their confirmed support plan
 - c) The provider is accountable to the person
 - d) The provider commits to only spend the money on the individual's service and the management and support necessary to provide that service
- 25 Potential benefits of this way of working are:
- a) Enabling people to manage their money who may otherwise have solely received directly commissioned services
 - b) The provision of a means to Self Directed Support that is suitable for people who don't have a bank account
 - c) The potential that the Individual Service Fund can be a transitional arrangement that can help people develop the capacity to manage a direct payment

- d) The freedom it gives individuals to work directly with the providers of the services they use
- 26 Providers to take part in the ISF pilot have been identified and work is underway to decide on individuals who would benefit.

Supported Managed Accounts

- 27 These have been available in Surrey for some time and are currently being provided by the Surrey Independent Living Council (SILC). A fee is paid to SILC to manage the accounts and they work with individuals to manage and reconcile the money.
- 28 Currently around 10% of those on a direct payment have a supported managed account. The weekly cost associated within SMAs makes them a relatively costly option. There are also some concerns that SMAs are not always selected for individuals in a consistent and/or appropriate way by staff in Personal Care and Support. In order to address these concerns a review is to be undertaken in the first quarter of 2012. The scope of this review will include looking at the costs, benefits and uses of SMAs. We plan to speak to Personal Care and Support team members and people who use services, as well as reviewing case files.

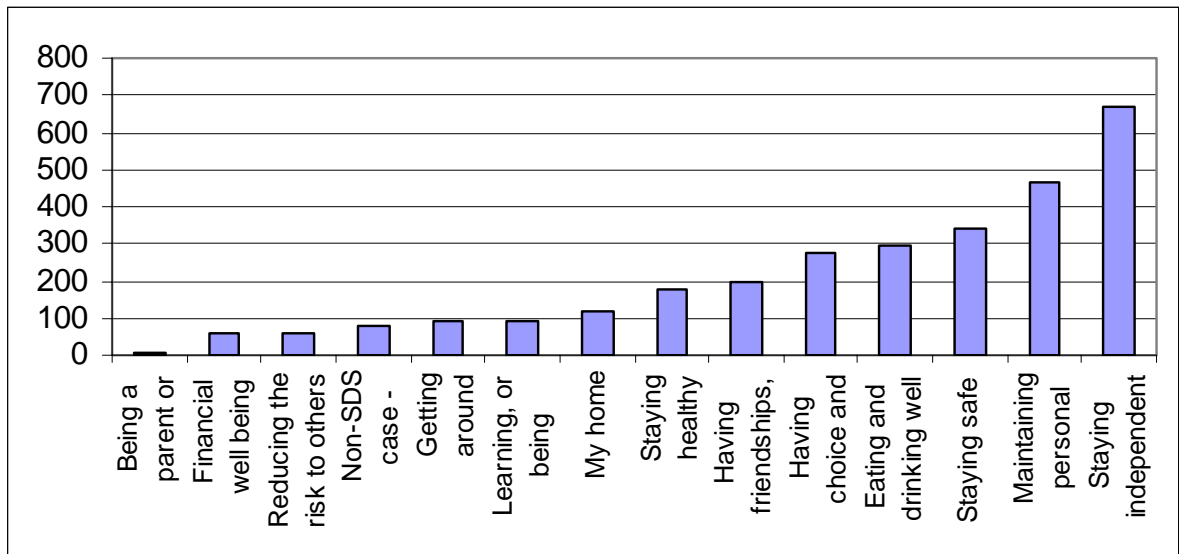
I had a great job working for the Post Office for 10 years but I had to leave due to the loss of my sight. Now I'm volunteering at the Hub in Epsom one day a week and I'm very grateful that I have the opportunity to be working again. I think that the direct payment method of payment is a good way of helping me to be able to manage my funds for the various services that I receive. Money and I do not get on!!! I have never been able to handle money very well so the support I get with my Direct Payment is very good for me.

Outcomes

- 29 With the introduction of Self Directed Support and the Adults Integrated System we are now able to monitor the outcomes of the support plans for people who use services and their carers:
- a) Over 9,000 people who use services and carers have one or more personal outcomes recorded.
 - b) Where progress is recorded at review, 80% of people who use services and 76% of carers consider their outcomes are being achieved.
- 30 The top three outcomes recorded for people who use services⁴ are:
- a) Staying independent and maximising potential
 - b) Maintaining personal dignity
 - c) Staying safe

⁴ Source AIS Nov 2011-11-30

Figure 1 – Number of people who use services where progress has been reviewed and recorded against their identified personal outcomes

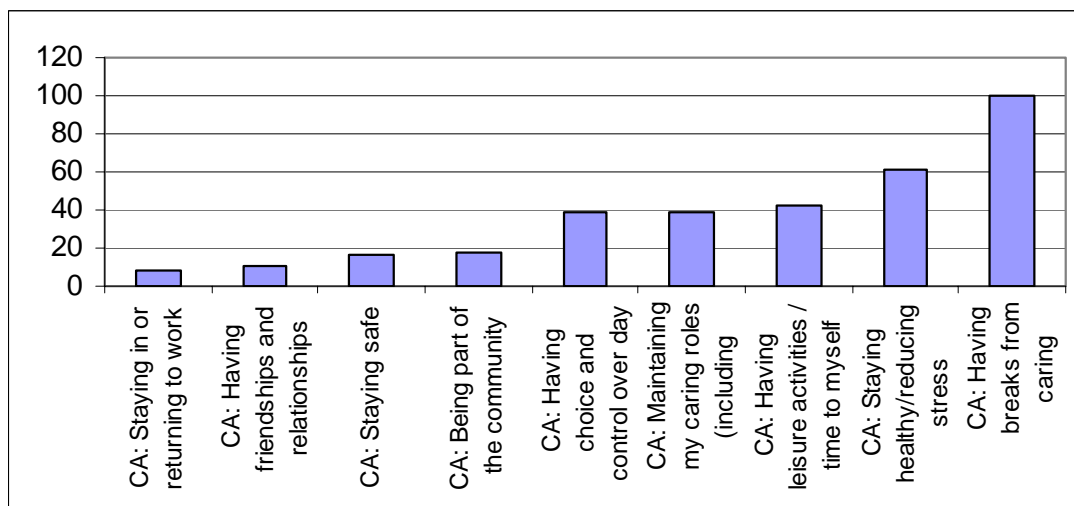


With help from Surrey Independent Living Council (SILC) we shared a respite holiday together. Taking control of how I organised this was a rare treat due to financial hardship. The money was spent wisely. We used our disabled discount and travel cards wherever possible. Even discussing what we would like to do was empowering. I made a keepsake book for all our adventures to look back on through the coming year. Our Direct Payment enabled us to do things that were otherwise impossible: such as have spa treatments with the students at the Guildford College, split a pizza and ice cream Sunday after the musical “Thriller”, visit the Gauguin exhibition on Christmas Eve and the butterflies in the hothouse at Wisley RHS. You made it possible to have a Christmas tree and enjoy a turkey dinner in front of a log fire. Then a New Years meal at Carluccios in Esher to round things off.

31 For carers the top three outcomes recorded are:

- a) Having breaks from caring
- b) Staying healthy/reducing stress
- c) Having leisure activities / time to myself

Figure 2 - Number of carers where progress has been reviewed and recorded against their identified personal outcomes



Resource Allocation System

- 32 In Surrey we use a system that allocates, or “scores” points to each answer given in the Supported Self Assessment. These points then translate into amounts of money which, when combined, show an indicative personal budget. Whilst points are allocated to reflect the volume of support required to meet a person’s eligible needs, an additional amount is added to reflect any support to the assessed person that a carer requires to continue caring. The Resource Allocation System therefore invites a person and their carer to look at their situation as a whole, and to ensure the needs of the carer are taken into account when carrying out the Support Plan.
- 33 The Resource Allocation System is a guidance tool – it works on average support costs and cannot be expected to be accurate for those people with complex or fluctuating needs, or those requiring specialist services. The aim is to ensure equity. It challenges staff to share, discuss and record any disagreements with a score, and requires them to justify why a higher or lower figure may be more appropriate. At the same time, it serves as a challenge to people and their carers to make prudent decisions on their future care and support, and to look for innovative, no cost or low cost solutions.
- 34 The purpose of the Resource Allocation System is to:
- a) Make funding decisions fairer and more transparent
 - b) Ensure the correct balance in the system between adults and older people
 - c) Provide an up-front ‘indicative’ allocation of funding, so support planning can begin with a value
 - d) Allow support planning to be outcomes focused rather than services focused
 - e) Enable creativity, develop more informal support options and grow community capacity
 - f) Manage the budget and deliver savings identified in the Medium Term Financial Plan
- 35 Guidance from the Audit Commission has clearly stated, “Personal budgets in themselves are unlikely to produce significant cash savings”⁵. However, this is not to say that the implementation of Self Directed Support and the delivery of personalised services and support will not save money. In the long term, the satisfaction and wellbeing of personal budget holders is expected to improve. At the same time, it is expected that as more and more people take up direct payments and plan their own support, they will work out more creative and cost-effective ways to

⁵ Financial management of personal budgets: Challenges and opportunities for councils (Audit Commission, Oct 2010, p42).

achieve their outcomes. This is expected to reduce the number of high-cost packages of care and support in the future.

- 36 The year-to-date position in November 2011 of 5,610 people of all age groups (21.5%) with a supported self assessment is slightly below the target of 23.6% for November. Of the 5,610 people with a supported self assessment 46% are in receipt of a direct payment and of those aged 18-64, 73% are in receipt of a direct payment.

Reablement Service

What is Reablement?

- 37 A new reablement model and structure was launched on 1 September 2011. This successfully transformed Home Based Care into a Reablement Service. Surrey's Reablement Service is designed to help people learn how to accommodate their illness or condition and to maximise their level of independence by learning or relearning the skills necessary for daily living.
- 38 The principles underpinning Surrey's Reablement Service are as follows:
- a) Reablement is a universal offer based upon the individual being assessed as to whether they will benefit from skills gain
 - b) Telecare will be actively promoted and considered for every case as part of the core offer
 - c) In areas that have intermediate care teams in place it will need to be part of the decision-making for who is best placed to provide a skills gain programme
 - d) The service is clinician-led, usually an occupational therapist, physiotherapist or nurse
 - e) Reablement service forms part of the locality team. Supported Self-Assessment and support planning for people going through reablement will be the highest priority for the locality team
 - f) An initial review will be undertaken within two weeks to identify whether the skills gain programme needs to continue, if so it will not usually exceed six weeks
 - g) The service will be non-chargeable for the period of the skills gain programme
 - h) Once the skills gain programme is completed, the charging policy will apply – this applies even if supported self-assessment and/or the Indicative Weekly Budget is not yet completed

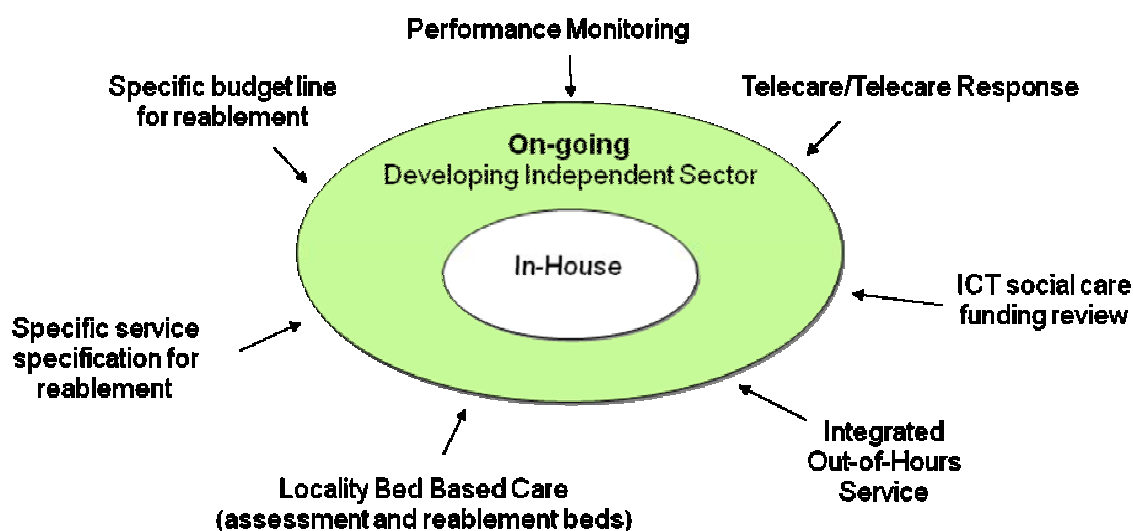
Part of an integrated approach

- 39 Reablement is part of Surrey's commitment to provide a range of prevention and early intervention services – including telecare – together with our partners in health, borough and districts, voluntary sector, etc.

Work to date has focussed upon designing, launching and embedding the in-house Reablement Service and significant progress has been made since April 2011 in:

- a) Establishing a clear understanding with internal and external partners of what reablement is
 - b) Providing consistent access and delivery of reablement across the county
 - c) Implementing a new staffing model
- 40 Figure 3 demonstrates how launching the new in-house reablement model and structure sits at the heart of our approach. Subsequent phases of the project will now begin to focus upon an integrated out-of-hours service, locality bed-based reablement, an integrated telecare response etc.

Figure 3 – Part of an integrated approach



Co-location with Locality Teams

41 The service forms part of, and is co-located with, the locality teams within Personal Care and Support. Being an integrated part of the locality team, ensures a seamless referral process, prevents any duplication of assessment and ensures a timely response. There are 284 reablement posts in the 11 locality teams across Surrey as follows:

Posts and Grades from September 2011	Number of Posts
Reablement Team Manager, SP10	4
Reablement Team Leader, SP7	28
Reablement Assistant, SP4	252
Totals	284

Recruitment

- 42 There are ongoing challenges in recruiting sufficient Reablement Assistants. A localised campaign is underway across the county, including local flyers and newspaper advertising. This campaign will run on an ongoing basis to attract the right members of staff.

Training

- 43 As part of establishing the new Reablement Service we are equipping the staff with assessment and support planning skills. A comprehensive training programme is currently being delivered to Reablement Assistants and Reablement Team Leaders and will run through to early February 2012. It includes an overview of personalisation and self-directed support, together with training in the concept of 'skills gain'. Skills gain is central to helping people to learn or relearn the skills necessary for daily living and this element of the training is being delivered by in-house Occupational Therapists who are taking a lead for reablement in their locality team.
- 44 The ambition is to give people easier access to equipment to enable them to maximise their level of independence. The plan is thus to train Reablement Assistants to assess for and prescribe a small range of minor aids to daily living. A robust process will support this, including the need for qualified Occupational Therapists to oversee and sign off all requests and for Reablement Assistants to achieve a level of competence before being able to assess. Training materials have been developed and the Learning and Development Team is actively commissioning external trainers to deliver throughout the county.

Care and Support Pathways

- 45 Reablement care and support pathways have been defined and operationalised across the county. The pathways set out criteria for accessing reablement and a route through which people are seamlessly referred into the Reablement Service from the Hospital, Long-Term, Locality and In-Touch teams.

How are we Performing?

- 46 The countywide Reablement Service was launched in September 2011 and is in the process of embedding the new model and structure. Performance data is in a similarly early stage. In response, a Reablement Metrics Group has been established and is focussing upon making improvements.
- 47 In the period May – September 2011, there were 1,684 new referrals into the in-house Reablement Service:

- a) Of the 1,684, 720 (43%) referrals came from hospitals, demonstrating how the Service is being responsive and working effectively as part of the Surrey health and social care system.
- b) Of the 1,684, 522 (31%) people were able to return to living independently after reablement input and a further 170 (10%) people were able to live independently with a reduced package of care.

What People Say

- 48 The 2011/12 Quarter 2 Reablement Survey demonstrates a high level of satisfaction with the Reablement Service and improvement in some key area when compared with the Quarter 1 results. For example:
- a) 31 of 34 survey respondents (91%) said they were Very or Quite Satisfied with the reablement service they received. For comparison, in Q1 this was 22 of 33 respondents (69%).
 - b) 29 of 34 survey respondents (85%) said they felt encouraged and supported by their care worker(s) to reach their full potential. For comparison, in Q1 this was 24 of 33 respondents (73%).
 - c) 31 of 34 survey respondents (91%) said they were helped by their care worker(s) in accordance with their rehabilitation care plan. For comparison, in Q1 this was 26 of 33 respondents (79%).
- 49 The following comments were also received as part of the Quarter 2 Survey and give a flavour of how people feel about their experience of the Reablement Service:
- a) "All the care workers were fantastic, very professional, very helpful and extremely caring. I could not have asked for a better service. Please pass on my thanks to all your ladies"
 - b) "I was surprised by the constant visits and help and concern for my welfare. I was well pleased and satisfied"
 - c) "I found the care workers very considerable, they were never in a hurry to get things done and leave as quickly as possible. Therefore, I never felt stressed or pressured in any way"

Conclusions:

- 50 Further work is needed to embed the culture and values that underpin Self Directed Support in Surrey. There is an opportunity to share best practice from amongst the external and internal brokers in how we help people with their support planning and thinking about different and creative solutions. We need to fully understand and address the barriers to the further take up of direct payments. The overall shift in funding control to direct payment recipients presents new challenges: we need to grow a more diverse range of services and develop and access social capital. People who use services and their carers need more options for managing their money; the introduction of Individual Service Funds (ISFs) will play an important role.

- 51 The Resource Allocation System model can be seen to be working for new assessments. Re-assessments of people who have not previously gone through Self Directed Support may prove challenging. The Resource Allocation System is affordable as it is currently being applied. The most significant savings are being seen in the learning disability area, which supports the findings of the learning disability Public Value Review.
- 52 The Reablement Service is now up and running across Surrey and making a tangible and positive difference to people's lives. The Reablement Service is assisting Adult Social Care to keep within the budget forecast. As we recruit to the vacancies the performance will improve. Outcomes will improve as we undertaken more specific training

Financial and value for money implications

- 53 Personal budgets in themselves are unlikely to produce significant savings; however, Self Directed Support and the delivery of personalised services and support may save money in the long term as the satisfaction and wellbeing of personal budget holders improves and as more people plan their own support and work out more creative and cost-effective ways to achieve their outcomes.

Equalities Implications

- 54 A full Equalities Impact Assessment has been undertaken on Self Directed Support.

Risk Management Implications

- 55 A risk register for all projects in the Adult Social Care Implementation Programme is updated monthly and reviewed by the Adults Leadership Team. Any risks scored as critical are reported as part of the Adults Social Care Corporate Risk Register. Self Directed Support does involve a balance of risk with creativity and choice. The challenge for Adult Social Care staff is to support individuals in making informed choices whilst managing risk.

Implications for the Council's Priorities or Community Strategy/Local Area Agreement Targets

- 56 Self Directed Support, the Resource Allocation Systems and the Reablement Service are already making a significant contribution towards the strategic shift outlined in the Adult Social Care Directorate Strategy to:
- a) Work with partners to co-design and deliver local, universal and preventative services
 - b) Continued shift from residential and nursing care to personalised community based care and support
 - c) Redesign systems, processes and structures for a Directorate that is fit for purpose

- 57 It will also contribute towards achieving the Council Council's corporate themes of Personal Responsibility and Deciding and Delivering Locally.
- 58 The rollout of Self-Directed Support will also play an important part in achieving the targets set in the Government's Vision⁶ to provide personal budgets for everyone eligible for ongoing social care, preferably as a direct payment, by April 2013.

Recommendations:

- 59 The Committee is asked to note this report and make any relevant comments.

Next steps:

Embed the culture and values that underpin Self Directed

Share best practice from amongst the external and internal brokers in how we help people with their support planning and thinking about different and creative solutions

Fully understand and address the barriers to the further take up of direct payments

Grow a more diverse range of services and develop and access social capital

Pilot and roll out Individual Service Funds (ISFs).

On-going analysis and recalibration of the Resource Allocation System

Introduce an electronic scheduling and monitoring system to further increase efficiency of deploying staff and reduce manual inputting

Integrate with an out of hours/night service, so there is consistent access and delivery of services across the county and an agreed care pathway with partners

Agree and pilot a model and structure for bed-based reablement

Ensure telecare is part of the core offer

Robust performance monitoring

Report contact: John Woods, Assistant Director Transformation, Adult Social Care

Contact details: 020 8541 7066; john.woods@surreycc.gov.uk

⁶ Department of Health 'A Vision for Adult Social Care: Capable communities and Active Citizens' (Nov 2010)

Sources/background papers:

- Putting People First – a shared vision and commitment to the transformation of adult social care (Dec 2007)
- Department of Health 'A Vision for Adult Social Care: Capable communities and Active Citizens' (Nov 2010)
- Financial management of personal budgets: Challenges and opportunities for councils (Audit Commission, Oct 2010)
- SWIFT AIS – Infoview reports